2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003604

FILED Apr 14, 2008 Secretary of State

Entity Name: FLORIDA WOMEN'S HOCKEY LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

3440 N GOLDENROD ROAD #1038 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

PO BOX 936621 5323 WATSON ROAD MARGATE, FL 33093 RIVERVIEW, FL 33578

FEI Number: 11-3754359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALSH, STEPHANIE
PO-BOX 936621
MARGATE, FL 33093
US
CAHOON, JOANNE
5323 WATSON ROAD
RIVERVIEW, FL 33578
US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOANNE CAHOON 04/14/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SUMNER, JENNY SUMNER, JENNIFER Name: Name: 3440 N GOLDENROD ROAD #1038 Address: 3440 N GOLDENROD ROAD #1038 Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792 Title: VP/T () Delete Title: () Change () Addition HORNE, DENISE A Name: Name: Address:

 Name:
 HORNE, DENISE A
 Name:

 Address:
 3722 LUZON STREET
 Address:

 City-St-Zip:
 FORT MYERS, FL 33901
 City-St-Zip:

Title: T/T () Delete Title: T/T (X) Change () Addition Name: WALSH, STEPHANIE Name: CAHOON, JOANNE

 Address:
 P.O. BOX 936621
 Address:
 5323 WATSON ROAD

 City-St-Zip:
 POMPANO BEACH, FL 330936621
 City-St-Zip:
 RIVERVIEW, FL 33578

Title: S/T () Delete Title: () Change () Addition

 Name:
 TURNER, DOLORES
 Name:

 Address:
 3440 N GOLDENROD ROAD #1038
 Address:

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:

Title: () Delete Title: TD/T () Change (X) Addition

 Name:
 Name:
 BOORTZ, PAMELA

 Address:
 Address:
 1213 EMERALD HILL WAY

 City-St-Zip:
 City-St-Zip:
 VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER SUMNER P/T 04/14/2008